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Nebraska Health & Human Services NEBRASKA WIC PROGRAM

**Procedure Title: Income** 

**Determination and Documentation** 

#### **Income Definition**

Income includes total gross cash earned by any and all members of a household or economic unit. It also includes any amount received or withdrawn from any source, including savings.

### **Gross Income Definition**

Gross income is defined as all income before deductions are made for income taxes, employee social security taxes, insurance premiums, bonds, etc.

# **Net Income Definition**

Income after all expenses and deprecation are deducted. Net income is used to determine income for self employed persons and farmers.

#### **In-Kind Definition**

Any benefit which has a monetary value and is received in place of money for services rendered. Examples included: housing, utilities, vehicles, food and gas provided or paid by employer.

In-Kind benefits are not counted as income.

# Who May provide Income Documentation

The following are allowed to bring income documentation to the clinic for eligibility purposes:

- Applicant/client
- Responsible Party
- Enrollment Proxy

Alternate shoppers are not allowed to provide documentation of income for purposes of enrollment.

# Income Listing and Acceptable Proof

The following table lists what is included as gross income, and the corresponding examples of acceptable proof.

All proof of income must be current, ie: within the last 30 days.

| GROSS INCOME INCLUDES                          | PROOF OF INCOME INCLUDES   |
|--|--|
| Monetary compensation for services, including  | ◆ Current pay stub(s) noting the pay time  |
| wages, salary, commissions, or fees            | frame (weekly, bi-weekly, monthly, etc.)   |
|  | ◆ Signed statement from employer indicating  |
|  | gross cash earnings for a specified period.  |
| Active military payments                       | ♦ Recent Leave and Earnings Statement,   |
|  | including CONUS COLA (Continental U.S. Cost  |
|  | of Living Allowance)   |
| Net income from farm and non-farm self-        | ♦ W-2 forms or income tax return for the most  |
| employment                                     | recent calendar year. Line 34 on Form 1040.  |
|  | ♦ Accounting records for the self-employed   |
| Social Security benefits                       | ◆ Check stub/award letter from Social Security   |
|  | stating current amount of earnings/bank  |
|  | statements.  |
| Dividends or interest on savings or bonds,     | ◆ Income tax return for the most recent calendar   |
| income from estates, trusts, or investments    | year   |
|  | ♦ Bank or account statements   |
| Net rental income                              | ◆ Income tax return for the most recent calendar   |
| 7.11   | year   |
| Public assistance or welfare payments; foster  | ◆ Check stub/award letter stating current amount   |
| care   | of earnings  |
|  | ◆ Foster child placement letter/foster parent award  |
| **   | letter.  |
| Unemployment compensation                      | ♦ Unemployment letter/notice   |
| Government civilian employee or military       | ◆ Annual statement that shows monthly amount of  |
| retirement or pensions or veteran's payments   | retirement income.   |
| Private pensions or annuities                  | ♦ Income tax return for the most recent calendar   |
| Alimony or child support payments              | year  ◆ Divorce decree   |
| Anniony of child support payments              | ◆ Award letter   |
|  |  |
| Disability Payments                            | ◆ Copy of check received   |
| Disability Fayments                            | ◆ Check stub/award letter stating current amount of disability received/bank statements.   |
| Unemployment                                   | · · · · · · · · · · · · · · · · · · ·  |
| Onemployment                                   | <ul><li>◆ Award letter stating current amount received</li><li>◆ Bank statements</li></ul> |
| Workers Compensation                           |  |
| workers Compensation                           | ◆ Pay Stub showing benefits received.  |
|  | ♦ Bank statements.   |
|  | ◆ Award letter/notice showing settlement amount  |
| Regular contributions from persons not living  | for wages.  ♦ Letter from person contributing resources to the                             |
| in the household. Includes payments for rent   | household  |
| & utilities or money sent/given to family from | ◆ Canceled check showing amount contributed to   |
| person living in another location.             | household  |
| 1  | ◆ Bank statement showing deposits  |
|  |  |
|  |  |
|  |  |

| Other cash income: Includes, but is not limited to withdrawals from any source, including substantial savings accounts which families are | ◆ Bank or account statements indicating regular draws on the account(s) |
|---|---|
| drawing upon (similar to a trust account), investments, trust accounts and other resources readily available to the family                |   |
| Net royalty payments: such as payments received fro writing a book; use of property;  | ◆ Income tax return for the most recent calendar year                   |
| extraction of oil, gas, minerals from your  | ♦ Bank statement showing deposits                                       |
| property, use of your name.   | ◆ Letter from source showing amount and date                            |
|   | received  |
| Census Income for 2010 Census   | Check Stub or Bank statement  |

**Income Exclusions** The following table lists exclusions to the WIC income definition.

| WHAT CANNOT BE COUNTED AS                | EXAMPLES:  |
|--|--|
| INCOME:                                  |  |
| <b>Assistance Received From Federal</b>  | Medicaid, Food Stamps, School Lunch, Family          |
| Programs                                 | Day Care Food Program, Child Care and                |
|  | Development Block Grant payments, public             |
|  | housing, home energy assistance, youth               |
|  | employment programs, relocation assistance,          |
|  | certain submarginal land of the U.S. which is held   |
|  | in trust for certain Indian Tribes.                  |
| Child's Income                           | Occasional earnings, such as: income from            |
|  | babysitting, mowing lawns.                           |
| Gifts                                    | Periodically given                                   |
| Loans                                    | Which must be repaid                                 |
| Lump-Sum                                 | Insurance payments for fire and flood damage to a    |
|  | house, if used for replacement. Insurance            |
|  | payments, including workers compensation for         |
|  | past or future medical expenses. Payments            |
|  | received by property owners from National Flood      |
|  | Insurance Program (NFIP). Payments under the         |
|  | Disaster Relief Act of Disaster Relief and           |
|  | Emergency Assistance.                                |
| Military Cost of Living Allowance        | For military staff living overseas. Listed as O      |
| (O CONUS COLA)                           | CONUS COLA (Overseas Continental U. S. Cost          |
|  | of Living Allowance) on the pay stub.                |
| Military Family Housing Allotment        | Cash housing allowances for military services        |
| -BHA, BMA, LQA, MIHA,                    | personnel residing off military installations or in  |
| OHA, TLA, TLA OCONUS                     | privatized housing whether on or off base. The       |
|  | value of inkind benefits for housing on or off base. |
|  | Listed as Basic Housing Allowance on pay stub.       |
| Military Family Subsistence Supplemental | For stateside & overseas military families who are   |
| Allowance - FSSA                         | below 130% poverty level. Listed as FSSA on pay      |
|  | stub.  |
|  |  |

| Military Combat Pay                             | Payments that are received:                        |
|---|--|
| J. J        | 1. When serving in a designated combat zone.       |
|   | and that are first received                        |
|   | 2. After they were deployed to the designated      |
|   | combat zone. and are received                      |
|   | 3. In addition to base pay.                        |
| Military Veteran' Educational Assistance        | 1 7  |
| Act mandatory salary reductions                 |  |
| Agent Orange Compensation payments              |  |
|   |  |
| Wartime relocation of Civilians payments        |  |
| Filipino Veterans Equity Compensation           |  |
| Fund payments                                   |  |
| Old Age Assistance Claims Settlement            | Except for per capita shares in excess of \$2000   |
| payments  |  |
| Non-Cash Benefits                               | Employer paid portion of health insurance and      |
|   | other employee fringe benefits, food or rent       |
|   | received in lieu of wages, the value of food and   |
|   | fuel produced and consumed on farms.               |
| In-Kind   | The value of any non-cash compensation             |
|   | Examples: housing provided to ministers or ranch   |
|   | workers. Meat/food provided to farm or ranch       |
|   | workers.   |
| Payment to Volunteers                           | ◆ Under Title I (Vista, etc.)                      |
|   | ◆ Under Title II (Retired Senior Volunteer         |
|   | Program, Foster Grandparents, etc.)                |
|   | ♦ Under the Small Business Act                     |
| <b>Payments Received Under the Job Training</b> |  |
| Partnership Act                                 |  |
| <b>Student Financial Assistance</b>             | For any program funded under Title IV, including   |
|   | the Pell Grant, Supplemental Educational           |
|   | Opportunity Grant, State Student Incentive Grants, |
|   | National Direct Student Loan, PLUS, College        |
|   | Work Study, and Byrd Honor Scholarship             |
|   | programs. Scholarships and grants. Payments        |
|   | received under Carl D. Perkins vocational and      |
|   | Applied Technology Education Act.                  |
|   | Torr Formus  |
| Earned Income Tax Credit refund/payment         | Tax Forms  |
| Medicare prescription drug card subsidies.      | Any subsidy that a household receives through the  |
| received by escription and cara substates.      | prescription drug discount card program            |
|   | presentation drug discount curd program            |
|   |  |

### **Current Income Definition**

Current income is income received by a household during the month prior to the individual's application.

# **Annual Income Definition**

Annual income is income received by the family/household during the past 12 months.

# Using Current vs. Annual Income

Staff who assess income eligibility shall consider both the annual and current income of the family to determine which is the better indicator of income that the household is receiving at this point in time.

#### Exceptions to Using Current or Annual Income

The two exceptions to using either the income over the past year or current income are:

- Anticipated income if a person thinks he/she will get a job
- Clients who have started a new job, but hasn't yet received pay.

Do not count this income. Only income that has actually been received may be counted.

Staff should tell clients who are anticipating a new job, that if their income changes substantially they should notify clinic staff at that time.

# Temporarily Low or Infrequent Income

Income determination for a family with temporary low or infrequent income is based on an average of the family's income during the period of infrequency or irregularity of employment. Families who might be in this category can include, but are not limited to, construction workers, seasonal agricultural workers such as farmers, or self-employed persons, persons on maternity leave.

## Temporary Lack of Income

Persons who are not receiving any income should have their eligibility determined based on their current rate of income. Clients who this affects are:

- Those who are currently unemployed and not receiving unemployment benefits.
- Those who are temporarily laid off and expect to be called back to work in the future.
- Workers on strike

#### Converting to Annual Income

The income calculator in the WIC computer system automatically converts income to an annual amount for all payment options, with the exception of hourly wages, which must be calculated manually and entered into the system.

To manually convert income to annual amount:

- Take the weekly income and multiply times 52.
- Bi-weekly (every other week), income should be multiplied by 26.
- Semi-monthly income should be multiplied by 24.
- Monthly income should be multiplied by 12
- Hourly income should be calculated by multiplying the rate of pay x the hours worked/week x 52.

#### One Person in Family Certified and Found Over Income

When any member of a family or household is found to be over income during a certification visit, ALL members of that family or household are to be considered over income.

#### Exceptions are:

- children who are adjunctively income eligible as recipients of Medicaid, SNAP or ADC.
- members of households with a pregnant woman or infant receiving ADC, Medicaid or SNAP.

#### **Lump Sum Payments**

Lump sum payments, which are counted as income, should not be counted in the monthly income. Rather, the lump sum payment should be counted as an annual income or divided by 12 to establish a monthly income. This will account for the non-recurring or infrequent receipt of such payments

# No Proof of Income – Adjunctively Eligible

If the applicant receives Food Stamps, ADC, Medicaid, or Kids Connection, staff should contact DHHS to verify that the applicant is adjunctively eligible.

When staff is unable to verify participation in one of the above programs, income should be screened using self declaration.

If the person is over income they would be denied benefits at that time. Eligibility would be reassessed when proof of participation in one of the approved programs is provided, or proof of income is brought to clinic

If the applicant meets income guidelines the certification visit would continue.

## No Proof of Income – 30 Day Extension

There are instances when an applicant may be a walk-in or otherwise fail to bring proof of income to the certification appointment. If the applicant meets all other eligibility criteria, staff should screen for income eligibility based on self-declaration. For those found to be income eligible provide one month's benefits, and require that the appropriate income documentation be brought in within 30 days.

If the applicant fails to bring in the appropriate income documentation within the 30-day time period or is determined to be over income when documentation is presented, the individual shall be determined ineligible and will be provided an Ineligibility Letter. No additional benefits need to be provided.

If the applicant returns within the 30-day period with the documentation that verifies income eligibility, the applicant should be certified for a certification period which would begin with the month benefits were initially provided.

# **Applicants With No Proof of Income**

There are applicants who may be unable to provide proof of income to WIC staff. Examples of these situations are homeless families, persons who are paid with cash, migrant farm workers, and undocumented workers.

Two options exist for WIC staff to use in these situations:

**Option 1:** Someone who has knowledge of the applicant's income (i.e. caseworker, employer, or pastor) may complete a Nebraska WIC Program Income Letter for the applicant. The letter may be found at the end of this procedure.

The letter should be retained in the applicant's file and noted on the WIC Signature Form.

**Option 2:** If staff determines that requiring the applicant to provide income documentation would present an unreasonable barrier to participation, the applicant may self declare their income.

In these instances the No Proof box on the WIC Signature Form should be completed and initialed by the applicant. The reason why the applicant could not provide documentation of income should be noted. An example would be a teenager living with her parents and the parents are unwilling to provide income information to WIC.

### Applicants Reporting Zero Income

Except in very rare cases, zero income is not an acceptable statement of income. If the individual is homeless, they may have no source of income or support. In these cases document on the WIC Signature Form why income is being reported as zero. See Volume I, Section L regarding homeless applicants.

### **Applicants Reporting Zero Income (cont.)**

When zero income is reported, the applicant should be asked to describe in detail their living circumstances and how they obtain basic living necessities such as food, shelter, medical care and clothing. It is especially important in these cases to review income information with the applicant to determine how the applicant is supported.

Leading questions such as where are you getting food, where are you living, who is paying the rent or mortgage payments, and how long has the family been without income will give insight into how the applicant is supported. Let the applicant know that you are not trying to pry into his/her personal life, but that the information is necessary to determine income eligibility for the Program.

# **Applicants Reporting Negative Income**

When an applicant shows no profit or a loss for a year (i.e. farmers, self-employed), be sure to document on the WIC Signature form an explanation of the individual's income (i.e. individual shows loss of \$5,000, existing on farm loans).

#### Reassessing Income Eligibility Mid Certification

A participant's income eligibility must be reassessed during the certification period when information is received:

- About a change in circumstances indicating possible income ineligibility, including family size.
- Indicating that a change in income eligibility has occurred.
- That confirms the individual or other eligible family member is no longer participating in Medicare, SNAP, Kids Connection, or TANF or other program which was used to determine a participant adjunctively eligible.
- From an outside source that indicates the family's circumstances have changed or that not all information relating to income and/or family size was reported at the certification visit.

#### Exception to Reassessment of Income Eligibility Mid Certification

Reassessment of income eligibility is not required at the time the local agency receives information indicating that the participant's income or family size may have changed when this information is received 90 days or less before the end of the certification period.

# Documentation of Income in Applicant Files

The income documentation seen should be noted on the WIC Signature Form along with the signature of the staff person who assessed income and the date income was assessed.

Documentation of Income in The WIC ADP System The annual income should be placed in the income field of the computer screen.

| NEBRASKA WIC PROGRAM<br>INCOME LETTER  |  |  |
|--|--|--|
| The Nebraska WIC Program requires proof of income in order to provide eligible applicants with program services. This letter allows another person to provide proof of income. |  |  |
| Please complete the following:   |  |  |
| Agency/Organization Representative's Name: (Print)   |  |  |
| Agency/Organization:   |  |  |
| Address:   |  |  |
| Telephone Number:  |  |  |
| I verify that is employed  |  |  |
| by the above listed company/person.  |  |  |
| Please complete this section with the amount paid and how often paid.  |  |  |
| Amount Paid  |  |  |
| Signature of agency/organization representative Date   |  |  |

#### Nebraska WIC Program Income Letter

**Explanation:** The Income Letter is a letter of support completed by a reliable third party verifying income for a WIC applicant.

#### **Instructions:**

#### The employer/third party should write:

- His/her identifying information in the spaces provided.
- The name of the person for whom they are providing income information for.
- The amount paid to the employee listed and how often this amount is paid. Examples: hourly wage, salaried wage paid monthly.
- Sign and date the form in the appropriate area.